ZAHFRI P756US

Manchester, NH 03101-1151

COMBINED DECLARATION AND POWER OF ATTORNEY

(Original, Design, National Stage of PCT, Supplemental)

As a below named inventor, I hereby declare that:

	TIPE OF DECLARATION				
This declaration is	of the following type: (check one applicable item below)				
☐ des ☐ sup ☑ Na ☐ div ☐ cor	ginal sign oplemental tional Stage of PCT isional (see added page) ntinuation (see added page) ntinuation-in-part (see added page)				
	INVENTORSHIP IDENTIFICATION				
My residence, post office address and citizenship is as stated below next to my name. I believe that the named inventor listed below is the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
	TITLE OF INVENTION				
	WHEEL HUB DRIVE				
	SPECIFICATION IDENTIFICATION				
(a)	f which: (complete (a), (b) or (c)) is attached hereto. was filed on as Serial No or Express Mail No as Serial No. (not yet known) and was amended on (if applicable).				
(c) ⊠ (d) □	was described and claimed in PCT International Application No. PCT/EP2003/014289 filed on <u>December 16, 2003</u> and as amended under PCT Article 19 on (if any). amended on				
(4)	POWER OF ATTORNEY				
namely, Anthony (Michael J. Bujold Jay S. Franklin, Reg the United States P	or, I hereby appoint all of the practitioners associated with the Customer No. 020210 , G. M. Davis, Registration No. 27,868, Gary D. Clapp, Registration No. 29,055, Registration No. 32,018, Scott A. Daniels, Registration No. 42,462 and distration No. 54,105, as attorneys and/or agents to represent the undersigned before Patent and Trademark Office (USPTO) in connection therewith.				
	s part of this Declaration and Power of Attorney is the authorization of the above- to accept and follow instructions from my representative(s).				
Send Corresponde	nce to:				
Customer No. 020 Davis & Bujold, P.					
Fourth Floor 500 N. Commercia	Direct Facsimiles to: (603) 624-9229				

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent Office all information which is known to be material to patentability of this application as defined in § 1.56 of Title 37 of the Code of Federal Regulations.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NO.	DATE OF FILING (day,month,year)	PRIORITY CLAIMED UNDER 37 USC 119	
Fed. Rep. of Germany	102 60 003.1	(20.12.2002) 20 December 2002	X YES NO	
			YES NO	
			YES NO	
	,		YES NO	
			YES NO	

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature(s)

Full name of sole deal Inventor's signature _	쫺 inventor F ra	nk STÜBNER	ΛΕ A/ A>
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